| j   | \$ e4                            |  |               |                      |                                 |  |          | Application or Docket Number |                          |           |                |                        |  |
|---|----------------------------------|--|---------------|----------------------|---------------------------------|--|----------|------------------------------|--------------------------|-----------|----------------|------------------------|--|
| <i>)</i>  | PATENT A                         | PPLICATIO  | 09/698195     |                      |                                 |  |          |                              |                          |           |                |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                                  |  |               |                      |                                 |  |          | SMALL ENTITY TYPE            |                          |           | OTHER THAN     |                        |  |
| TC  | TAL CLAIMS                       |  |               |                      |                                 | Ì                                      | RATE     | PEE                          | ] [                      | RATE      | FEE            |                        |  |
| FO  | R                                | NUMBER FILED   |               | NUMBER EXTRA         |                                 |  | BASIC FE | E 375.00                     | OR                       | Basic Fee | 77.0.00        |                        |  |
| TO  | TAL CHARGEA                      | 27 minus 📭   |               | · 0                  |                                 |  | X\$ 9=   |                              | OR                       | X\$18=    |                |                        |  |
| IND   | EPENDENT CL                      | 10 minus0=   |               | · 4                  |                                 |  | X43-     |                              | OR                       | X86=      |                |                        |  |
| MU  | LTIPLE DEPEN                     | DENT CLAIM PF  | RESENT        |                      |                                 |  |          | +140=                        |                          | OR        | +280=          |                        |  |
| * If the difference in column 1 is less than zero, enter *0" in column 2  |                                  |  |               |                      |                                 |  |          | TOTAL                        |                          | OR        | TOTAL          | 770.                   |  |
| APVILLA VA VIII PILA PARA IL III.   |                                  |  |               |                      |                                 |  |          |                              |                          |           | OTHER<br>SMALL |                        |  |
| AMENDMENT C   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |               | HIGI<br>NUM<br>PREVI | HEST<br>ABER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA                       |          | RATE                         | ADDI-<br>TIONAL<br>FEE   |           | RATE           | ADDI-<br>TIONAL<br>FEE |  |
|   | Total                            | . 21   | Minus .       | - 2                  | 7                               | - 4                                    |          | X\$ 9=                       |                          | OR        | X\$18=         |                        |  |
| ME  | Independent                      | . 8  | Minus         |                      | 0                               | 1.4                                    | 1        | X43=                         |                          | OR        | X86=           |                        |  |
| L   | FIRST PRESE                      | NTATION OF M   | JLTIPLE DEI   | PENDEN               | T CLAIM                         | ــــــــــــــــــــــــــــــــــــــ | j        | +140=                        |                          | OR        | +280=          | -                      |  |
| - L \.J   |                                  |  |               |                      |                                 |  |          | TO1/                         |                          | OR        | TOTAL          | -                      |  |
| (   | (Column 1) (Column 2) (Column 3) |  |               |                      |                                 |  |          |                              | :E <b>L</b>              | 10        | ADDIT. FEE     |                        |  |
| F   |                                  | CLAIMS REMAINING AFTER AMENDMENT                               |               | HIG<br>NUI<br>PREV   | REST.<br>MBER<br>HOUSLY<br>DEOR | PRESENT                                | 7        | RATE                         | ADDI-<br>TIONAL<br>FEE   |           | RATE           | ADDI-<br>TIONAL<br>FEE |  |
| ğ   | Total                            | . 21   | Minus         | * 0                  | 21                              | - /                                    | 1        | X\$ 9=                       | . /                      | OR        | X\$18=.        |                        |  |
| AMENDMENT   | Independent                      | . 7  | Minus         |                      | B                               | · /                                    | ]        | X43 =                        | 1-/                      | OR        | X86=           | 1                      |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                  |  |               |                      |                                 |  |          |                              |                          | +280=     | /              |                        |  |
| ,   | 1.400                            |  |               |                      |                                 |  |          | ADDIT. FE                    |                          | OR        | ADDIT. FEE     |                        |  |
| 4   | 15/05                            | (Column 1)   |               |                      | ımn 2)                          | (Column 3                              | )        |                              | L .                      |           |                |                        |  |
| ENT   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |               | NU                   | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA                       |          | RATE                         | ADDI-<br>TIONAL<br>FEE / |           | RATE           | ADDI-<br>TIONAL<br>FEE |  |
| Ş   | Total                            | . 21   | Minus         | - (                  | 20                              |  |          | X\$ 9=                       |                          | OR        | X\$18=         | 1                      |  |
| AMENDMENT   | Independent                      | • 8  | Minus         |                      | 0                               | -                                      |          | X43=                         | 1 /                      | OR        | X86=           | 1/                     |  |
| L   | FIRST PRESI                      | ENTATION OF M  | ULTIPLE DE    | PENDE                | VT CLAIN                        |  | J        | +140=                        |                          | OR        | +280=          | 1/                     |  |
| * If the entry in column 1 is less than the entry is column 2, write "0" in column 3.  * If the entry in column 1 is less than the entry is column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE |                                  |  |               |                      |                                 |  |          |                              |                          |           |                |                        |  |
|   | "If the "Highest Ni              | imper Previously P<br>imber Previously P<br>mber Previously Pa | add For IN TH | IIS SPACI            | E is less th                    | an 3, enter "3."                       | •        | ADDIT. FE                    |                          | -         | AUUII. PEE     | <b>-</b>               |  |
|   | THE TRUEBLINE                    | imei Lieudisi) Le  | MATTER STATES | w weekel             | ~eriq is (i)                    | a reference man                        | H        | ~~~ 41 414                   | after of same o          | ·.        |                |                        |  |